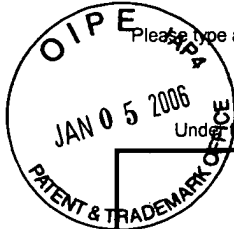


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PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/739,933
Filing Date	December 18, 2000
First Named Inventor	REID, JAMES STEVEN
Group Art Unit	1649
Examiner Name	TURNER, SHARON L.
Attorney Docket Number	IRVN-263CIP

Total Number of Pages in This Submission 32

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Communication (1 pg.) <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Copies of Appellants' Reply Brief and Request for Oral Hearing as timely filed on September 12, 2005. &amp; postcard date stamped by the Patent Office (30 pgs.)</b> <b>Postcard</b>
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)	CAROL L. FRANCIS, 36,513 BOZICEVIC, FIELD & FRANCIS, LLP
Signature	
Date	January 5, 2006

EXPRESS MAIL LABEL NO. EV 687 636 505 US

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**COMMUNICATION**

Address to:  
Mail Stop: Appeal Brief - Patent  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer Number	24353
Atty. Docket No.	IRVN-263CIP
Application Number	09/739,933
Confirmation Number	4882
Filing Date	December 18, 2000
First Named Inventor	REID, JAMES STEVEN
Examiner Name	TURNER, SHARON L.
Group Art Unit	1649

Sir:

It has come to Appellants' attention that neither their Reply Brief nor their Request for Oral Hearing has been entered into the PAIR database of the U.S. Patent and Trademark Office. Teleconferences with officials at the Board of Appeals and Patent Interferences and with Examiner Turner has confirmed that these papers were never matched with the file.

We enclose here copies of Appellants' Reply Brief and Request for Oral Hearing as timely filed on September 12, 2005. We also include a copy of the postcard date stamped by the Patent Office, indicating these documents were timely received.

Immediate entry of Appellants' Reply Brief and Request for Oral Hearing is respectfully requested.

While no fees are believed due with this Communication, the Commissioner is hereby authorized to charge any underpayment of fees associated with this communication, including any necessary fees for extensions of time, or credit any overpayment to Deposit Account No. 50-0815, order number IRVN-263CIP.

Date: Jan 5, 2006

BOZICEVIC, FIELD & FRANCIS LLP  
1900 University Avenue, Suite 200  
East Palo Alto, California 94303  
Telephone: (650) 327-3400; Facsimile: (650) 327-3231

Respectfully submitted,  
BOZICEVIC, FIELD & FRANCIS LLP

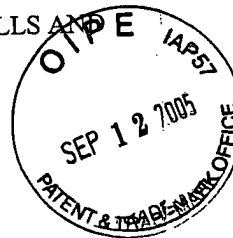
By: Carol L. Francis  
Carol L. Francis  
Registration No. 36,513

Atty/Sec: CLF/mpc  
Atty Docket No. IRVN-263CIP Date Mailed: September 12, 2005  
Application No.: 09/739,933 Filing Date: December 18, 2000  
Inventor(s): REID, JAMES STEVEN

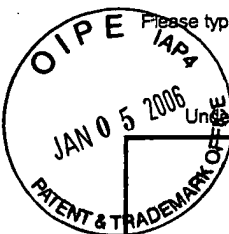
Title: "COMPOSITIONS AND METHODS FOR  
MANIPULATING GLIAL PROGENITOR CELLS AND  
TREATING NEUROLOGICAL DEFICITS"

Enclosure(s):

- ❖ Transmittal (1 pg.)
  - ❖ Fee Transmittal (1 pg.)
  - ❖ Credit Card Payment Form (1 pg.)
  - ❖ Request for Oral Hearing (2 pgs.)
  - ❖ Appellants' Reply Brief Under 37 C.F.R. §41.41 (25 pgs.)
- EXPRESS MAIL LABEL NO.EV 687 633 362 US



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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/739,933

Filing Date December 18, 2000

First Named Inventor REID, JAMES STEVEN

Group Art Unit 1649

Examiner Name TURNER, SHARON L.

Total Number of Pages in This Submission

Attorney Docket Number IRVN-263CIP

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Credit Card Payment Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Request for Oral Hearing
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input checked="" type="checkbox"/> Appellants' Reply Brief Under 37 C.F.R. §41.41
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Documents		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent  
(Reg. No.)

CAROL L. FRANCIS, 36,513  
BOZICEVIC, FIELD & FRANCIS, LLP

Signature

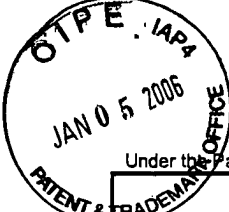
Date

September 12, 2005

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01-09-06

1049

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/739,933
		Filing Date	December 18, 2000
		First Named Inventor	REID, JAMES STEVEN
		Examiner Name	TURNER, SHARON L.
		Art Unit	1649
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	IRVN-263CIP
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 500.00			

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <b>50-0815</b> Deposit Account Name: <b>Bozicevic, Field and Francis LLP</b> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
- 20 or HP = _____		x	_____	=	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
HP = highest number of total claims paid for, if greater than 20							
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 3 or HP = _____		x	_____	=			
HP = highest number of independent claims paid for, if greater than 3							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____	=	_____			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other: <b>Fee for Request for Oral Hearing</b>							<b>\$500.00</b>

<b>SUBMITTED BY</b>		
Signature		Registration No. (Attorney/Agent) 36,513
Name (Print/Type)	Carol L. Francis	Telephone (650) 327-3400
		Date 09/12/2005

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